

7015 0640 0004 9388 3046

CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®	
OFFICIAL USE	
Certified Mail Fee	\$ <u>7/24/15</u>
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted	\$ _____
Postage	\$ _____
Total Postage and Fees	\$ _____
Sent To	Jason Bowles
Street and Apt. No., or PO	Bowles & Crow
City, State, ZIP+4®	P.O. Box 25186
	Albuquerque, NM 87125-5186
	EP14CV291-KC Doc #46 mn
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	